PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

09748758

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS			Column	1)	COIL	IIIN 2)	1	TYPE [OR	SMALL	
			ļ					RATE	FEE		RATE	FEE
FOR the second of the second o		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			23 minus 20=		. 3			X\$ 9=		OR	X\$18=	BSY
	EPENDENT C	6 minus 3 =		.3			X40=		OR	X80=	240	
ML	MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=	C.
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1004
CLAIMS AS AMENDED - PART II								TOTAL		Jon		
(Column 3))	SMALL ENTITY			OTHER THAN SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	128	Minus 🗼			= 5] [X\$ 9=		OR	X\$18=	911
	Independent		Minus		CI AIM	<u> -</u>	11	X40=		OR	X80=	7
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							J	+135=		OR	+270=	
The same of the sa								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	91)
	A THE PERSON AND A	(Column 1)		(Colur	ກກ 2) ື້	(Column 3)		NOUII. FEE (
AMENDMENT B.		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	A	Minus	**		=	11	X\$ 9=		OR	X\$18=	
	Independent	1	Minus	***			11	X40=		OR	X80=	
		NTATION OF MI		ENDENT	CLAIM	- 	┚╏	+135=		OR	+270=	
								TOTAL		OP	TOTAL	
	•	(Column 1)		ical	0\	(C-1 0)		DDIT. FEE		0.1	ADDIT. FEE	
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO	EST BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ş	Total		Minus '	**		=		X\$ 9=		OR	X\$18=	1 6
ME	Independent	•	Minus	***		=	1					
<u> </u>	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		╽┝	X40=		OR	X80=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **OPA												
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 8/00)

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